

State of Wisconsin
Department of Natural Resources
Box 7921
Madison, WI 53707

IRREVOCABLE LETTER OF CREDIT FOR CLOSURE (_____) (Number)
(For Use by Hazardous Waste Facilities)
Form 4400-137
Rev. 04-01

Dear Secretary, Department of Natural Resources:

We hereby establish our Irrevocable Letter of Credit No. _____ in favor of the State of Wisconsin
Department of Natural Resources as beneficiary, at the request and for the account of _____

(Owner's Name and Address)

as customer, up to the aggregate amount of _____ U.S. dollars \$ _____,
available upon presentation of:

1. A sight draft, bearing references to this letter of credit no. _____, together
with
2. A signed statement declaring that the amount of the draft is payable pursuant to regulations
issued under the authority of section 289.41, Wisconsin Statutes, as amended.

Whereas the customer owns a hazardous waste facility named _____,

EPA Identification Number _____, located in Section _____, Township _____,

Range _____, Town/City/Village of _____, _____ County,
Wisconsin, and that facility is subject to either the closure requirements of the plan of operation approval issued by the

beneficiary, dated _____, and any amendments thereto or the closure requirements of section NR
(Date)

685.05, Wisconsin Administrative Code, whichever is applicable to the facility.

This letter of credit is written to provide proof of financial responsibility pursuant to section 289.41, Wisconsin Statutes, and
section NR 685.07, Wisconsin Administrative Code, as amended, to ensure compliance with the closure requirements of the
plan of operation approval and any amendments thereto or the closure requirements in section NR 685.05, Wisconsin
Administrative Code, whichever is applicable, and shall inure to the benefit of the beneficiary.

This letter of credit is effective on _____, and shall expire on _____,
except that this letter of credit shall automatically renew on each successive termination date until all of the closure
requirements have been completed, unless we elect to cancel this letter of credit. In the event we wish to cancel this letter of
credit, we shall provide notice in writing of our intent to cancel to the beneficiary by registered or certified mail not less than
120 days prior to the end of the current term of this letter of credit. Unless the customer delivers to the beneficiary a
replacement letter of credit or other proof of financial responsibility under section 289.41, Wisconsin Statutes, we shall pay to
the beneficiary the unused balance of this letter of credit on the termination date.

Whenever this letter of credit is drawn on under and in compliance with the terms of this credit, we shall duly honor such
draft upon presentation to us.

All or any part of this letter of credit may be drawn upon by the beneficiary, upon written request of the Secretary of the beneficiary, and in accordance with section NR 685.07, Wisconsin Administrative Code, as amended, to be used to carry out the closure requirements of the plan of operation approval and any amendments thereto or the closure requirements of section NR 685.05, Wisconsin Administrative Code, if applicable, if the customer or any successor in interest fails to do so.

I hereby certify that I am authorized to execute this letter of credit on behalf of _____

(Name and Address of Issuing Institution)

a bank or financial institution which is examined and regulated by a federal agency, or in the case of a bank or financial institution located within the State of Wisconsin, which is examined and regulated by the state or a federal agency.

Attest:

(Signature and Title of Official of Issuing Institution)

(Date Signed)

This credit is subject to the Wisconsin Uniform Commercial Code and the Uniform Customs and Practice for Documentary Credits as most recently published by the International Chamber of Commerce. In the event of inconsistency, the Wisconsin Uniform Commercial Code shall apply.